

AUTHORIZATION FOR
AUTOMATIC CREDIT CARD PAYMENT

VILLAGE OF MACKINAW, WATER/SEWER DEPARTMENT

I/We authorize the Village of Mackinaw to initiate debit entries and, if necessary, to initiate any credit entries to correct an erroneous debit entry to my/our credit card, for the purpose of automatically debiting funds to my/our account. I/We acknowledge that the origination of these transactions must comply with the provisions of U.S. law.

Credit Card Holder/s: _____

Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Account number: _____

Card #: _____

Card Verification Code: _____

Expiration Date: _____

Card Type: _____

Email: _____

___ 1st of Month

___ 20th of Month

___ NEW AUTHORIZATION ___ CHANGE TO PREVIOUS ___ TERMINATION

I/We understand that this authorization replaces any previous authorization and will remain in full force and effect until the Village of Mackinaw has received written notification from me (or either of us) of its termination in such time and in such manner as to afford the Village of Mackinaw and Credit Card Holders a reasonable opportunity to act on it.

(Signature)

(Date)

(Signature)

(Date)